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PROMO	TE PROT	ECT PRO	SPER

Nonce Nonce	Large and Small Construction Activities.
	Large and Small Construction Activities,
(SU) - (SU)	NPDES General Permit SCR100000 JAN 1 2 2009
PROMOTE PROTECT PROSPER	For official use only
For official use only	Lot official ase only
File number: 10 -09 - 01 - 02	MALESTON
Permit number: SCR10 K 4a 7	For official use only CHARLESTON OFFIC
1/2/20	
Submittal package complete: 1150	
Public Notice Start Date (OCRM only): 1-16-0	<u> </u>
Submission of an NOI constitutes notice that the	
entity identified in Section Lintends to be authorize under SCR100000. Instructions on page 5.	ed
Date: 12/23/2008	
Project/ Sife Name: James Island High School E	Expansion - Early Clearing County: Charleston
Do you want this project to be considered for t	the Expedited Review Program (ERP)? Tyes No (See instructions.)
	tory requirements or Low Impact Development? □Yes □No
 Project Information Project Owner/ Operator (Company or personal Company or person	SON! Charleston County Sahari District
Company EIN:	Phone: 843-566-8128 Fax: 843-566-8124
Mailing Address: 3999 Bridgeview Drive	City: N. Charleston State: SC Zip: 29405
Permit Contact (if owner is company): Bill Le	ewis Phone: 843-566-8128
Mailing Address: same	City: State: Zip:
Email address (optional):	
 II. Property Information A. Site Location (street address, nearest interest) 	ersection etc.): 1000 Fort Johnson Road
City/ Town (if in limits): Charleston	Latitude: 32 ° 44' 0" N Longitude: -79 ° 56' 17" W
Tax map # (list all): 428-00-00-011	<u> </u>
B. Property Owner: Charleston County Scho	
Mailing Address: 3999 Bridgeview Drive	City: N. Charleston State: SC Zip: 29405
III. <u>Site Information</u>A. Disturbed area (to the nearest tenth of a	an acre): <u>10.4</u> acres Total area: <u>39.9</u> acres
B. Is this project part of a Larger Common F	Plan for Development or Sale (LCP)? XYes \(\sumbox\)No
LCP/ Overall Development Name: James is	
Previous state permit/ file number: Not A	AVAILABLE Previous NPDES coverage number: SCR10
C. Start Date (MM/DD/YYYY): 05/01/2009	Completion Date: <u>05/01/2010</u>
D. Is this site located on Indian Lands? ☐ Ye	es XNo If yes, name of reservation. Industrial
E. Type of Activity (check one): The sidential: Single-f	-family Multi-use (Commercial & Residential)
☐ Linear ☐ Residential: Multi-fo	
	tream of or adjacent to this site? □Yes ☒No
	oly or Notice of Violation for this site or LCP? □Yes ■No
H. Is any part of the property located inside	
If yes, list the MS4 operator or urbanized	permits or approvals applied for or obtained for this site (e.g., RCRA).
List all state and federal environmental p	perfilis of approvals applied for or obtained for this site (e.g., kchn).
IV. Waterbody Information	
A. Nearest receiving waterbody(s)[RWB]: T	<u>Fributary to Simpson Creek</u> Distance to nearest RWB (feet): <u>0</u>
Classification of nearest RWB: <u>FW</u>	Next/Nearest named RWB: <u>James Island Creek</u>
B. 1. Waters of the U.S./ State	On the site? Delineated/ Impacts? Amount of impacts
	Identified?
a. Jurisdictional wetlands	☐Yes ☑No ☑Yes ☐No ☐Yes ☑No ☐0.000 AC
b. Non-jurisdictional wetlands c. Other Water(s) List:	X Yes No X Yes No X Yes No 0.670 Ac X Yes No X Yes No 0.000 Ac 0 Feet
C. Other Water(s) List: Critical Area	X Yes ☐ No X Yes ☐ No ☐ Yes X No 0.000 Ac 0 Feet
	•
2. If yes for impacts in B.1, describe each impa	act and activity, and list all permits (e.g., USACOE Nationwide permit,
DHEC General Permit) and certifications tha Filling of two non-jurisdictional wetland pockets. Va	at have been applied for or obtained for each impact. /alid ACOE Jurisdictional Determination applies.

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C. Impaired Waterbodies (See instructions.)			
List the nearest DHEC water quality monitoring s	tation(s) [WQMS(s)] to v	which construction storm	nwater (SW) disc larges
will drain and the corresponding waterbody(s) 1. Is this WQMS(s) listed on the most current 30 a. If you for 1. list the impairment(s)	3(d) List for Impaired v	Waters? (1) (s E No	200g
 a. If yes for 1, list the impairment(s). b. If yes for 1, will the site's construction SV 	V discharges contain a	inv polluter (A) redustror	the impeliment(s)?
∐Yes ∐NO			CRM
 c. If yes for b, list the impairment(s) affect d. If yes for b, will use of the proposed BM 	ed by the pollutant(s) r	referenced in b.	atribute to or cause
further water quality standard violation	ns for the impairment(s)	listed in c? Tyes No)
Has a TMDL(s) been developed for this WC	MS(s)? □Yes ⊠No		
 a. If yes for 2, list the impairment(s). b. If yes for 2, has the standard been after 	ined for all impairment	f(s)? □Yes □No	
c. If no for b, will the site's construction SW	/ discharges contain a	ny pollutant(s) causing t	the impairment(s)?
☐Yes☐Nod. If yes for c, are your discharges consists☐Yes☐No	ent with the assumption	ns and requirements of	the TMDL(s)?
D. 1. Are S.C. Navigable Waters (SCNW) on the sit	e? □Yes ⊠No		
 a. If yes for 1, list the name of the SCNW: b. If yes for 1, will any construction activities 	es cross over or occur	in, under, or through the	∍ SCNW? □Yes □No
 c. If yes for b, then describe activities. d. If yes for b, are the activities in SCNW of 			
a. It yes for b, are the activities in SCINW C Yes TNo	overea unaer a DhEC	General remit of othe	i Ducc berring
e. If no for d, has an SCNW permit been o	applied for or issued for	r the site?	
☐ Yes, for all activities ☐ Yes, for som f. If yes for d or e, list permit number(s) a		vitles.	
V. Operator Information A. SWPPP Preparer: Michael Cain, P.E.		S.C. Reg	istration #: 1171915191
Company/ Firm: Hussey, Gay, Bell, & DeY	oung Ino	5	C COA # IDID[1] 9 [4]
Mailing Address: 474 Wando Park Blvd. Suite	201 Ci	ty: Mt. Pleasant Sto	te: sc Zip: 29464
Phone: (Day) <u>843-849-7500</u> Email address (optional):	(Mobile)	(Fax) <u>843-</u>	849-7502
B. Operator of Day-to-Day Site Activities [OD	SA1 (Company or pers	son): To be determined	
hadiling Addroca	` (1	the State	te:Zip:
Phone: Site Contact (If ODSA is company):	Fax:	Phone:	
VI. Signatures and Certifications: DO NOT SIGN	I IN BLACK INKI	1 100101	
A. One copy of the SWPPP, all specifications a	nd supporting calculation	ons, forms, and reports ar	e herewith submitted
and made a part of this application. I have signifying that I accept responsibility for the	placed my signature ar	nd seal on the design doc orther. I certify to the hest	cuments submitted
belief that the design is consistent with the r	equirements of Title 48, (Chapter 14 of the Code (of Laws of SC, 1976
as amended, pursuant to Regulation 72-300	et seq., and in accordo	ance with the terms and	conditions of
SCR100000. (This should be person identified Check one. ☑ Engineer ☐ Tier B Surveyor		1	
Check one. At a gine a land a solveyor	AA SAA		
Michael Cain, P.E.	<u> </u>		17959
Printed name of SWPPP Preparer	Signature of St	WPPP Preparer	S.C. Registration #
B. I certify under penalty of law that this docume			
accordance with a system designed to assu submitted. Based on my inquiry of the persor	re that qualified personr	nel properly gather and e	valuate the information
for gathering the information, the informatic			
and complete. I am aware that there are sig	gnificant penalties for sub		
of fine and imprisonment for knowing violati I hereby certify that all land-disturbing c		ited activity pertaining to	this site shall he
accomplished pursuant to and in keeping w			
certify that a responsible person will be assign			
to S. C. Department of Health and Environment the site at all times for the purpose of on site in			
inspections following the completion of the			
authority information.)	ſ	14 /	11.
William Levy	()	Whener	1/5/09
Printed name of Project Owner/Operato	r Signature of	Project Owner/ Operat	or Date
j			

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WETLAND IMPACT STATEMENT:

THIS PROJECT IS PROPOSED TO IMPACT 0.67 ACRES OF FEDERALLY NON-JURISDICTIONAL WETLANDS. THESE PROPOSED IMPACTS REQUIRE APPROVAL UNDER THE SCCZM PROGRAM. THIS PLAN WILL FILL ONE 0.13 ACRE AREA OF A 0.13 ACRES FEDERALLY NON-JURISDICTIONAL WETLAND AND ONE 0.54 ACRE AREA OF A 0.54 ACRES FEDERALLY NON-JURISDICTIONAL WETLAND FOR A TOTAL IMPACT OF 0.67 ACRES.



